EF-264-AH-R10-0512-17000242-1 BOE-264-AH (P1) REV. 10 (05-12)

COLLEGE EXEMPTION CLAIM

This claim is filed for fiscal year 20 ____ - 20 ____. (Example: a person filing a timely claim in January 2011 would enter "2011-2012.")



Douglas W. Wacker County Assessor-Recorder

Lake County Courthouse 255 North Forbes Street Lakeport, CA 95453

Assessor's Office Phone: 707-263-2302 Recorder's Office Phone: 707-263-2293

Fax: 707-263-3703

This claim must be filed by 5:00 p.m., February 15.

CLAIMANT NAME AND MAILING ADDRESS (Make necessary corrections to the printed name	e and mailing address)			
Г	٦	FOR ASSESSOR'	S USE ONLY	
		Received by		
		(Assessor's	designee)	
		Of(county	or city)	
L	لـ	on		
		(da	ate)	
NAME OF CLAIMANT				
TITLE OF CLAIMANT		DA	AYTIME TELEPHO	NE NUMBER
CORPORATE NAME OF THE COLLEGE			,	
ADDRESS (Street, City, County, State, Zip Code)	A A 4 I			
ASSESSOR'S PARCEL NUMBER OR LEGAL DESC	RIPTION	DATE PROPERTY	WAS FIRST USED	BY CLAIMANT
 Owner and operator: (check applicable bo Claimant is: Owner and operator 	oxes) ☐ Owner only ☐ Operator onl			
and claims exemption on all Land	☐ Buildings and improvements	y and/or ☐ Personal property	,	
Does the above institution qualify as a col				
YES NO				
3. Is the institution conducted as a non-profit	entity?			
YES NO		V		
4. Does the institution require for regular adr	mission the completion of a four-yea	r high school course or its equivaler	nt?	
YES NO		and demand have designed as		: !:
Does the institution confer upon its graduat and sciences, or on a course of at least the				
veterinary medicine, pharmacy, architectur	re, fine arts, commerce, or journalisi	m?		
YES NO				
6. Is the property for which the exemption is	claimed used exclusively for the pu	urposes of education?		
YES NO	for a substate or a superior than the substance of a substance of	atata dha makaran and kashda atata a	- f l A44 l-	
List all buildings and other improvements to sheet if necessary. Indicate whether lease		state the primary and incidental use	e of each. Attacr	i a separate
LOCATIONS	PRIMARY USE	INCIDENTAL USE		
			LEASE	
			LEASE	OWN
			LEASE	\square OWN
			LEASE	\square OWN
			LEASE	\square OWN
			LEASE	\square OWN

THIS DOCUMENT IS SUBJECT TO PUBLIC INSPECTION



8. Has any construction commenced ar YES NO If YES , plea	d/or been completed on this parcel since 12. se explain:	2:01 a.m., January 1 of last year?	
as defined in section 512 of the Interr YES NO If YES , a copy of the institution's m	nal Revenue Code? ost recent tax return filed with the Internal R	bookstore that generates unrelated business taxable inconstruction. Revenue Service must accompany this claim. Property tax to the bookstore's gross income, will be levied.	
10. Has any of the property listed above YES NO If YES , plea	been used for business purposes other that se explain:	an a student bookstore?	
11. If any business is operated by some	one other than the college, attach a copy of	the lease or other agreement. Please explain:	
YES NO If YES , list on a separate sheet the	vely for educational purposes at the collegis	type, make, model, and serial number of the property. If iate level, please state the other uses of the property. If	
The benefit of a property tax exemptaxation Code.	tion must inure to the lessee institution. If tax	xes paid by the lessor, see section 202.2 of the Revenue	and
substituted.Attach a separate page, or degree.		d upon the graduates and the requirements for each statement for the preceding fiscal year.)	
Whom should	I we contact during normal business ho	ours for additional information?	
NAME		TITLE	
DAYTIME TELEPHONE	EMAIL ADDRESS	I.	
()	OFFITIO ATION		
I and if was also also also also also also also al	CERTIFICATION	to the table form and all information because the first	
		a that the foregoing and all information hereon, including olete to the best of my knowledge and belief.	any
SIGNATURE OF PERSON MAKING CLAIM		TITLE	
NAME OF PERSON MAKING CLAIM		DATE	—

